| UNITED STATE | ES DISTRICT COURT | | | |
|--|---|--|--|--|
| Northern I | for the District of Indiana | | | |
| Alysia Duncan and Sydnee Fritz, individually and on behalf of those similarly situated, |))) | | | |
| Plaintiff(s) V. Derby Wings, LLC |) Civil Action No. 4:21-cv-73) | | | |
| Defendant(s) |))) | | | |
| SUMMONS IN A CIVIL ACTION | | | | |
| To: (Defendant's name and address) Derby Wings, LLC c/o CT Corporation Syste 334 North Senate Avenu Indianapolis, IN 46204 | | | | |
| A lawsuit has been filed against you. | | | | |
| are the United States or a United States agency, or an or P. 12 (a)(2) or (3) — you must serve on the plaintiff an | on you (not counting the day you received it) — or 60 days if you fficer or employee of the United States described in Fed. R. Civ. answer to the attached complaint or a motion under Rule 12 of notion must be served on the plaintiff or plaintiff's attorney, | | | |
| If you fail to respond, judgment by default will You also must file your answer or motion with the cour | be entered against you for the relief demanded in the complaint. rt. | | | |
| | CLERK OF COURT | | | |
| Date: | | | | |

Signature of Clerk or Deputy Clerk

Civil Action No. 4:21-cv-73

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

| | This summons for (nan | ne of individual and title, if any) | | | |
|--------|--|-------------------------------------|---------------------------------|------|--|
| was re | ceived by me on (date) | · | | | |
| | ☐ I personally served | the summons on the individual | at (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons at the individual's residence or usual place of abode with (name) | | | | |
| | , a person of suitable age and discretion who resides there, | | | | |
| | on (date), and mailed a copy to the individual's last known address; or | | | | |
| | \square I served the summons on (name of individual), who | | | | |
| | designated by law to accept service of process on behalf of (name of organization) | | | | |
| | | | on (date) | ; or | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | |
| | ☐ Other (specify): | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 | |
| | I declare under penalty of perjury that this information is true. | | | | |
| Date: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

Additional information regarding attempted service, etc: